

Department of Human Services  
Bureau of Human Service Licensing  
LICENSING INSPECTION SUMMARY - PUBLIC

August 6, 2025

[REDACTED]  
LECOM AT ELMWOOD GARDENS LLC  
[REDACTED]

RE: PARKSIDE AT ELMWOOD  
2628 ELMWOOD AVENUE  
ERIE, PA, 16508  
LICENSE/COC#: 45593

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 07/24/2025 of the above facility, no regulatory citations have been identified as a result of this inspection.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,  
[REDACTED]

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information		
<b>Name:</b> PARKSIDE AT ELMWOOD	<b>License #:</b> 45593	<b>License Expiration:</b> 06/04/2026
<b>Address:</b> 2628 ELMWOOD AVENUE, ERIE, PA 16508		
<b>County:</b> ERIE	<b>Region:</b> WESTERN	

Administrator		
<b>Name:</b> [REDACTED]	<b>Phone:</b> [REDACTED]	<b>Email:</b>

Legal Entity		
<b>Name:</b> LECOM AT ELMWOOD GARDENS LLC		
<b>Address:</b> [REDACTED]		
<b>Phone:</b> [REDACTED]	<b>Email:</b> [REDACTED]	

Certificate(s) of Occupancy		
<b>Type:</b> C-1	<b>Date:</b> 04/03/1967	<b>Issued By:</b> L&I

Staffing Hours		
<b>Resident Support Staff:</b> 0	<b>Total Daily Staff:</b> 11	<b>Waking Staff:</b> 8

Inspection Information		
<b>Type:</b> Partial	<b>Notice:</b> Unannounced	<b>BHA Docket #:</b>
<b>Reason:</b> Complaint	<b>Exit Conference Date:</b> 07/24/2025	

Inspection Dates and Department Representative	
07/24/2025 - On-Site: [REDACTED]	

Resident Demographic Data as of Inspection Dates			
General Information			
<b>License Capacity:</b> 35		<b>Residents Served:</b> 10	
Secured Dementia Care Unit			
<b>In Home:</b> No	<b>Area:</b>	<b>Capacity:</b>	<b>Residents Served:</b>
Hospice			
<b>Current Residents:</b> 0			
Number of Residents Who:			
<b>Receive Supplemental Security Income:</b> 1		<b>Are 60 Years of Age or Older:</b> 10	
<b>Diagnosed with Mental Illness:</b> 5		<b>Diagnosed with Intellectual Disability:</b> 0	
<b>Have Mobility Need:</b> 1		<b>Have Physical Disability:</b> 0	

Inspections / Reviews	
07/24/2025 Partial	
<b>Lead Inspector:</b> [REDACTED]	<b>Follow-Up Type:</b> Not Required

NO DEFICIENCIES FOUND